

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines

12FE4M5

**Boucher for Congress Committee**

ADDRESS (number and street)

**PO Box 2000**☐ (Check if address is changed)**Abingdon****VA****24212**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address is changed)**rick@boucherforcongress.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)**boucherforcongress.com**2. DATE 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

 / 

|   |   |
|---|---|
| D | D |
| 1 | 9 |

 / 

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

3. FEC IDENTIFICATION NUMBER

**C C00178418**4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer **Amy Boucher**Signature of Treasurer Electronically Filed by **Amy Boucher**

Date

|   |   |
|---|---|
| M | M |
| 0 | 1 |

 / 

|   |   |
|---|---|
| D | D |
| 1 | 9 |

 / 

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2009)